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	CHEDULE B (FEC Form 3)	' Use separate schedule(s)	FOR LINE NUMBER: (check only one)		PAGE 28 / 28
!!	EMIZED DISBURSEMENT	for each category of the Detailed Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30b
	y Information copied from such Reports ar for commercial purposes, other than using				
\rangle	NAME OF COMMITTEE (In Full) Society for Vascular Surgery Politic	cal Action Committee			
	Full Name (Last, First, Middle Initial) MIKE MR. THOMPSON Mailing Address P O Box 1998			Transaction ID: Date of Disburse	ement
	City St. Helena Purpose of Disbursement	State Zip Code CA 94574		Amount of Each	Disbursement this Period 2000.00
	Candidate Name		Category/ Type		
	Office Sought: X House Senate President	Disbursement For: 2008 Primary X General Other (specify)			
	State: CA District: 01	•		1	

SUBTOTAL of Disbursements This Page (optional)	•	2000.00
TOTAL This Period (last page this line number only)	—	12000.00